

# STATE OF CALIFORNIA SAFETY ASSESSMENT PROGRAM GEOTECHNICAL EVALUATION

Facility Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Co-City-Vic \_\_\_\_\_  
 Mo/Day/Yr \_\_\_\_/\_\_\_\_/\_\_\_\_ Time \_\_\_\_\_  
use 24 hr.  
 Type of Disaster \_\_\_\_\_

SAP ID Nos. \_\_\_\_\_  
 Other Reports \_\_\_\_\_  
 No. Photos \_\_\_\_ No. Sketches \_\_\_\_  
 Ref. Dwgs. \_\_\_\_\_  
 Est. Damage % \_\_\_\_\_  
 Facility Status

**SAFETY INSTRUCTIONS:** The possibility of toxic gases in confined spaces or of fuel leaks should be recognized as a potential hazard.

**CAUTION:** The primary purpose of the report is to advise of the condition of the facility for immediate continued use/occupancy. REINSPECTION OF THE FACILITY IS RECOMMENDED. AFTERSHOCKS MAY CAUSE DAMAGE THAT REQUIRES REINSPECTION. The conclusions reached by engineers who re-examine the facility later should take precedence. The assessment team will not render further advice in the event of conflict of engineering recommendations.

**A. CONDITION:**

Existing: None  Recommended: Green  Posted at this assessment: Yes   
 Green  Yellow  No   
 Yellow  Red   
 Red

**B. RECOMMENDATIONS**

Monitor \_\_\_\_\_  
 Other \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**C. COMMENTS**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
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